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Implementation of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem: follow-up to the high-level review by the Commission on Narcotic Drugs, in view of the special session of the General Assembly on the world drug problem to be held in 2016

Action taken by Member States to implement the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem

Report of the Executive Director

Summary

The present report contains information based on the third round of responses provided by Member States to the annual report questionnaire (parts I and II) concerning action taken to implement the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem. The United Nations Office on Drugs and Crime prepares such a report on a biennial basis pursuant to Commission on Narcotic Drugs resolution 53/16, entitled "Streamlining of the annual report questionnaire". The report addresses measures taken by Member States in the areas of drug demand and supply reduction, countering money-laundering and promoting judicial cooperation, and includes related recommendations.

* E/CN.7/2016/1

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Contents

		Page
I.	Introduction	3
II.	Demand reduction and related measures	3
	A. Drug strategy and resources for treatment and prevention	3
	B. Prevention and early intervention	4
	C. Treatment	8
	D. Quality standards and training of staff	14
	E. Prevention of diseases, including infectious diseases	14
III.	Drug supply reduction and related measures	15
	A. Domestic supply reduction activities	16
	B. Cross-border and international cooperation	21
	C. International technical cooperation	25
	D. Control of precursor chemicals	27
	E. Alternative development	27
IV.	Countering money-laundering and promoting judicial cooperation to enhance international cooperation	31
	A. Countering money-laundering	31
	B. Judicial cooperation	36
V.	Recommendations	39

I. Introduction

1. The present report contains an analysis of the answers provided by Member States to parts I and II of the annual report questionnaire, adopted by the Commission on Narcotic Drugs in its resolution 53/16, entitled "Streamlining of the annual report questionnaire". In that resolution, the Commission requested the Executive Director to prepare and submit to the Commission, on a biennial basis, on the basis of the responses provided by Member States to the questionnaire, a single report on action taken to implement the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem, adopted during the high-level segment of the fifty-second session of the Commission and by the General Assembly in its resolution 64/182. The present, third such report, includes a more detailed analysis and descriptions of relevant developments over time. Member States were requested to submit their questionnaires for the reporting cycle 2014-15 by 30 June 2015.

II. Demand reduction and related measures

2. A total of 96 replies to part II of the annual report questionnaire had been received by November 2015, compared with a total of 85 replies by November 2013. Answers provided by Member States to questions 1 to 15 in each reporting cycle were analysed. Despite some subregional fluctuations, the analysis indicates that slightly over 70 per cent of the countries reporting during at least one cycle reported across all three cycles. Given the high response overlap between reporting cycles and in order to maximize the information provided, all countries reporting in each cycle were included in the analysis.

3. It is important to note that a large number of countries did not respond to the questionnaire, and that is further compounded by the fact that not all countries submitting the questionnaire answered all of the questions.

A. Drug strategy and resources for treatment and prevention

4. Across all reporting cycles, over 90 per cent (95 per cent in the third reporting wave) of Member States responding to part II of the questionnaire indicated that they had adopted a written national drug strategy that included a demand reduction component. As noted in the previous report, those strategies were all ongoing and had an average period of coverage of three to seven years. Most strategies covered prevention, treatment, rehabilitation and social reintegration services, services to prevent the health and social consequences of drug use and drug monitoring and research. Most reporting States entrusted a central coordination body with the implementation of the drug demand reduction component of the strategy. In over 85 per cent of responses in each reporting cycle, Member States indicated that the ministries of health, social affairs, education, law enforcement and justice were represented on the central coordination body. In between two thirds and three quarters of their responses, they indicated that non-governmental organizations, ministries of labour and employment and the private sector were represented on the central coordination body.

5. Despite the large proportion of Member States reporting a national demand reduction strategy, around one third of those strategies remained unfunded (32 per cent in the most recent reporting wave). The situation was particularly serious in Africa, where none of the strategies reported were funded, regardless of which wave and countries were submitting annual report questionnaires.

6. Among countries reporting the availability of funds for such strategies, the funding situation remained stable if the second and third reporting waves are compared. However, across all three waves, 25 per cent of the countries reporting from the African continent reported a decrease in prevention and treatment funding compared with the previous year (with the remaining 75 per cent reporting a stable situation at best). It is also worth noting that around one third of countries in Europe (Central, West, Eastern and South-Eastern Europe) reported a relative reduction in the funding allotted for drug prevention and treatment. A significant improvement in the amount of funds allotted for prevention and treatment was noted among countries in the Middle East and North Africa. Around 90 per cent of Central, South and West Asian countries reported a stable or decreased budget allotment for treatment in 2015.

B. Prevention and early intervention

7. Figures 1 to 4 present the responses of Member States regarding the implementation of various prevention activities, both in the general population and among groups at risk, further categorized by strength of evidence, as set out in the International Standards on Drug Use Prevention.

Figure 1

Number of countries reporting the existence of various prevention activities in the community with no or limited level of efficacy, 2010-11, 2012-13 and 2014-15

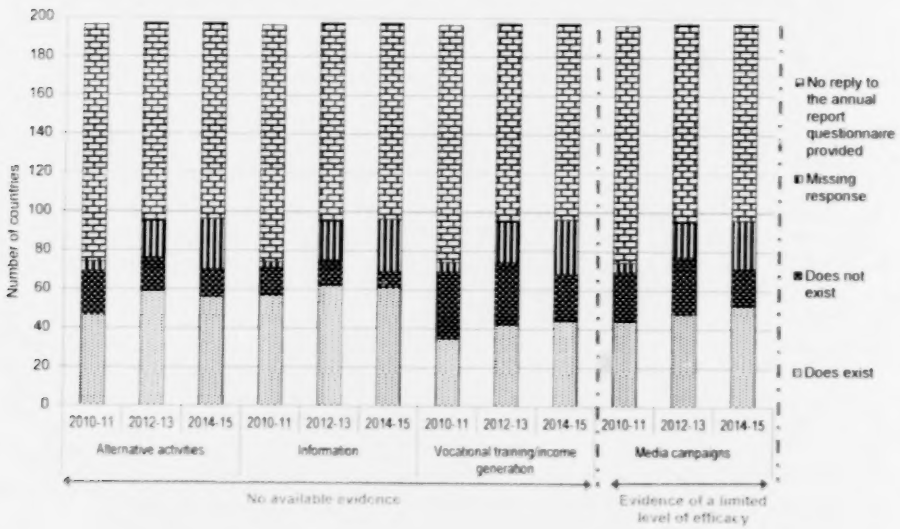


Figure 2

Number of countries reporting the existence of various prevention activities in the community with good or very good level of efficacy, 2010-11, 2012-13 and 2014-15

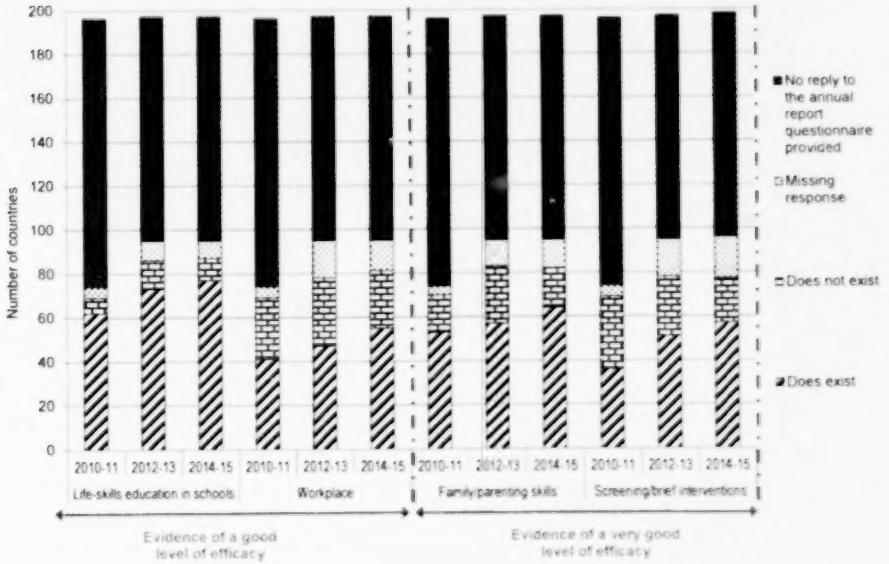


Figure 3

Number of countries reporting the existence of various prevention activities among at-risk groups with no or limited level of efficacy, 2010-11, 2012-13 and 2014-15

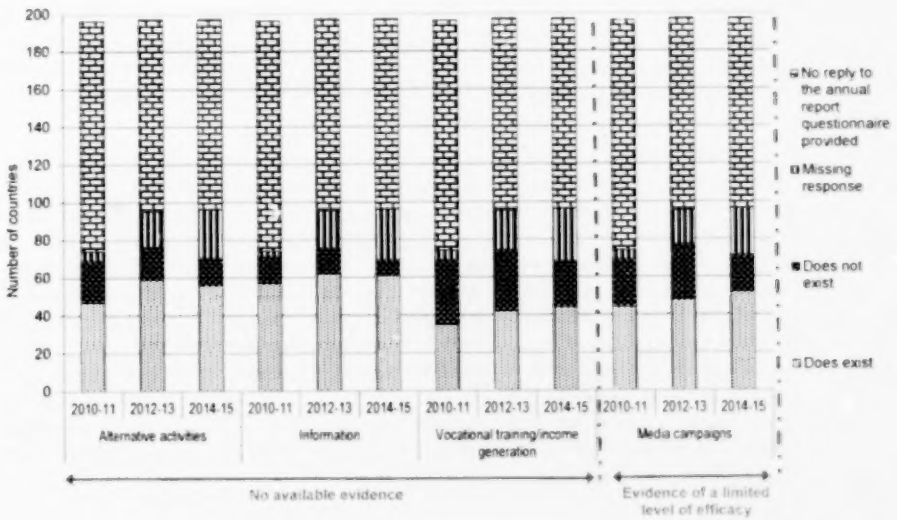
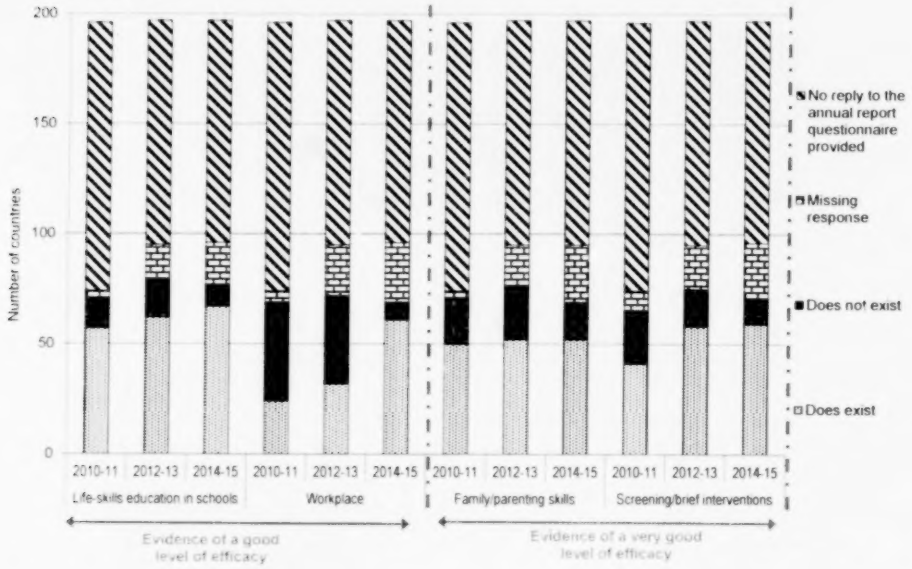


Figure 4

Number of countries reporting the existence of various prevention activities among at-risk groups with good or very good level of efficacy, 2010-11, 2012-13 and 2014-15



8. As for the previous cycles, fewer prevention activities targeted at-risk groups than targeted the general population. Moreover, across cycles, provision of information about drugs and media campaigns ranked as the most prevalent activity implemented in the general population. The analysis of the questionnaires for 2014-15 shows a slight increase in reports of activities among the general population and the at-risk groups. However, that increase (and the most frequently reported interventions, both in the general community and among at-risk groups), continued to be in areas where there was no, or a limited level of, evidence of effectiveness. Life skills education in schools and families and parenting skills training were reported by a number of Member States.

9. At the subregional level, the predominance of prevention interventions with low or no evidence of efficacy, as set out in the International Standards on Drug Use Prevention, was still noted. Moreover the Central, South and West Asia subregions reported an increasing number of countries disseminating information on the danger of drugs at the community level between the second and third reporting cycles (78 per cent to 100 per cent respectively) and that was also noted at the level of Central and Western Europe (from 87 per cent to 100 per cent between cycles 1 and 3). A decreasing number of countries in Latin America and the Caribbean reported availability of life skills education and workplace prevention at the community level (from 91 per cent to 73 per cent and 90 per cent to 70 per cent respectively between cycles 1 and 3). However on the positive side, an increasing number of countries in Central, South and West Asia, East and South-East Asia and the Middle East and

North Africa reported increased availability of screening and brief interventions at the community level (from 66 per cent to 90 per cent, 58 per cent to 85 per cent and 66 per cent to 88 per cent respectively between cycle 1 to cycle 3). Moreover an increasing number of East and South-East European countries and Middle Eastern and North African countries reported availability of life skills education in schools (from 79 per cent to 92 per cent and 40 per cent to 75 per cent respectively between cycles 1 and 3).

10. While the level of implementation of prevention activities was encouraging, the levels of coverage remain concerning across the reporting cycles. As can be seen from figure 5, high levels of coverage seem to be dominated by interventions with no or a limited level of efficacy according to the International Standards on Drug Use Prevention (three of the top four interventions reported with high coverage have no or a limited level of evidence of efficacy). Providing information about drugs and conducting media campaigns remain the interventions most frequently reported as having high coverage, despite that trend seemingly slightly attenuated during the third reporting cycle. Reports of high levels of coverage for the interventions with good or a very good level of efficacy tend to be less frequently reported in the third reporting wave as compared to the second (see figure 5).

11. Further to the above, the same pattern regarding evaluation was noted in the third reporting cycle (see figure 6). The majority of reported types of interventions remained unevaluated. Moreover in most instances, evaluation still focused on the process and not on the impact or outcome of the activity.

Figure 5

Proportion of Member States reporting high coverage of various prevention activities, categorized by level of efficacy according to the UNODC International Standards on Drug Use Prevention 2010-11, 2012-13 and 2014-15

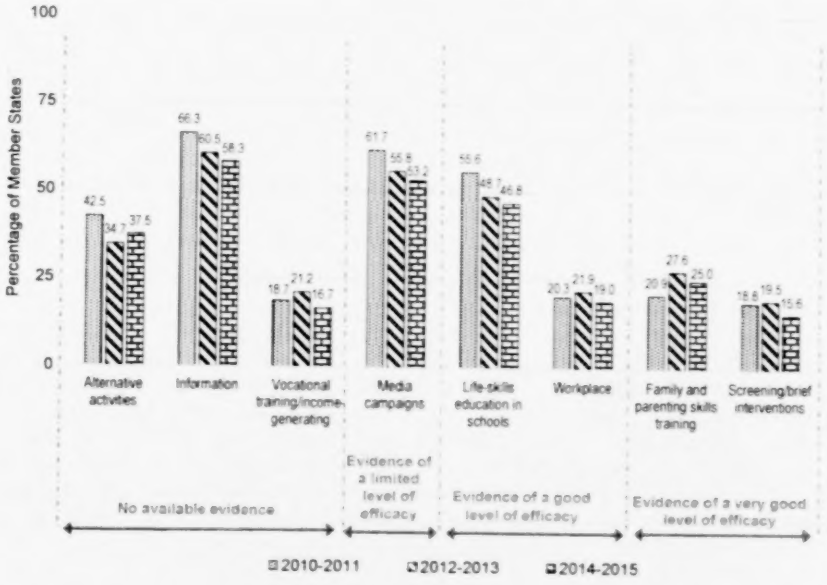
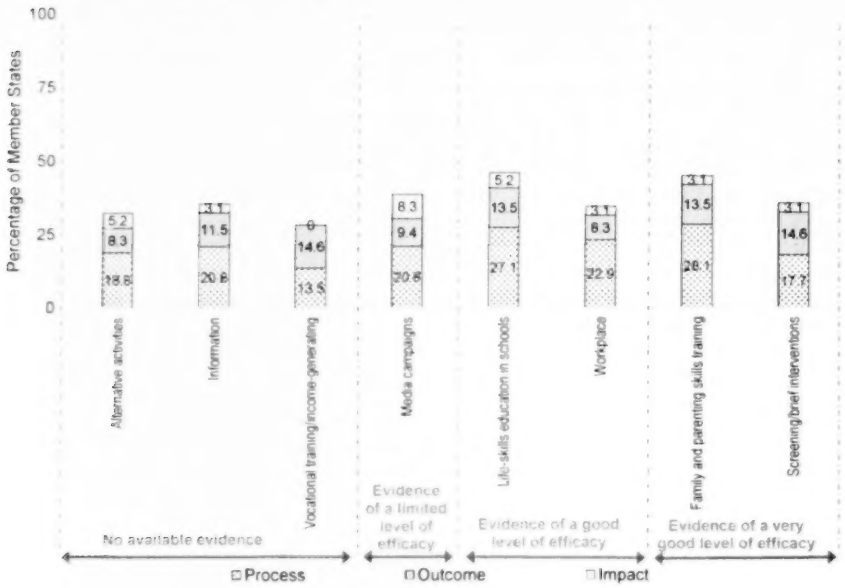


Figure 6

Proportion of Member States reporting evaluation of prevention activities during the third cycle (2014-15)



C. Treatment

12. In all cycles, more than 90 per cent of Member States reported that residential and outpatient drug treatment facilities were available. The percentage of units available for residential services seems to have decreased from 42 per cent in cycle 1 to 28 per cent in cycle 3, although that decrease ran parallel with an increase in the percentage of units available for outpatient services. However, the breakdown between the two types of facilities varied widely between countries (from a minimum of 4 per cent residential to a maximum of 94 per cent). Moreover, that reduction in the ratio of residential to outpatient beds could mostly be attributed to reports from Europe and the Americas (the reports from Africa and Asia continue to describe a 50/50 distribution between in- and outpatient units).

13. As far as the existence of treatment services is concerned, as in the previous cycles, the overall picture is still concealed by the fact that a large number of countries did not respond to the questionnaire. That was further compounded by a lack of responses regarding some services among countries that did submit the questionnaire. As for the other cycles, treatment services were categorized into three different types: pharmacological, psychosocial and services for social rehabilitation and aftercare. Those were assessed both at the community level and in prison settings. A recovery-oriented continuum of care would include and integrate the full range of services listed in the questionnaire, both at the community level and in prisons.

14. Among countries submitting a questionnaire in the third reporting cycle, the existence of services remains less frequently reported in prison settings than at the community level. Moreover, pharmacological treatment, particularly opioid antagonist therapy and opioid maintenance therapy, remained the least reported service, especially in prison settings. A more equitable distribution among the three treatment service types was noted among community-based services, whereas in prison settings most services focused on aftercare/rehabilitation services. The availability of services remained relatively stable across the three reporting cycles (see figures 7 to 12).

15. In countries submitting part II of the questionnaire, no significant fluctuation within subregions was noted with regard to services at the community level. There was, however, a notable discrepancy among subregions with regard to services in prison settings. Across reporting cycles, the regions or subregions with an average of fewer than 10 services reported as existing in each country in prison settings were the Middle East and North Africa, Latin America and the Caribbean, sub-Saharan Africa and Central and South-West Asia.

Figure 7

Trend in reports of the existence of pharmacological treatment in the community, 2010-11, 2012-13 and 2014-15

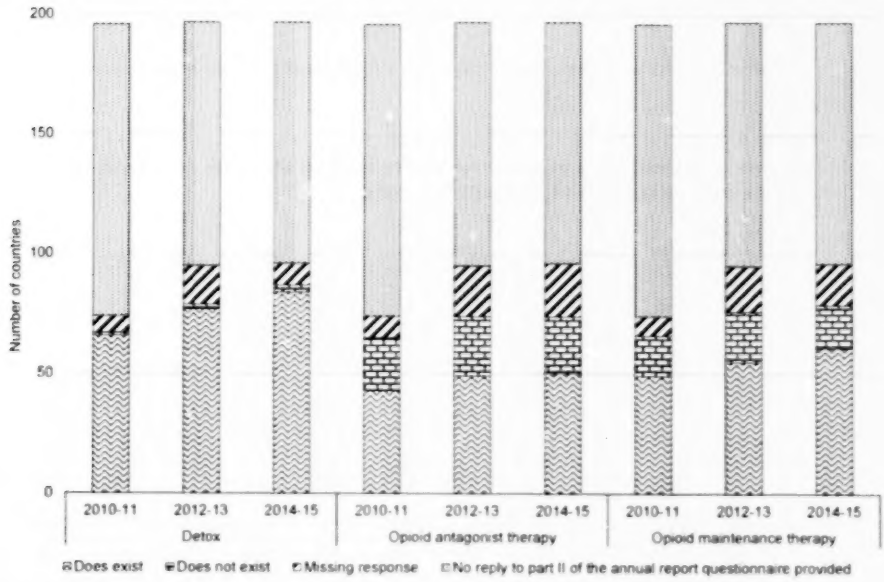


Figure 8

Reports of the existence of pharmacological treatment in prison settings, 2010-11, 2012-13 and 2014-15

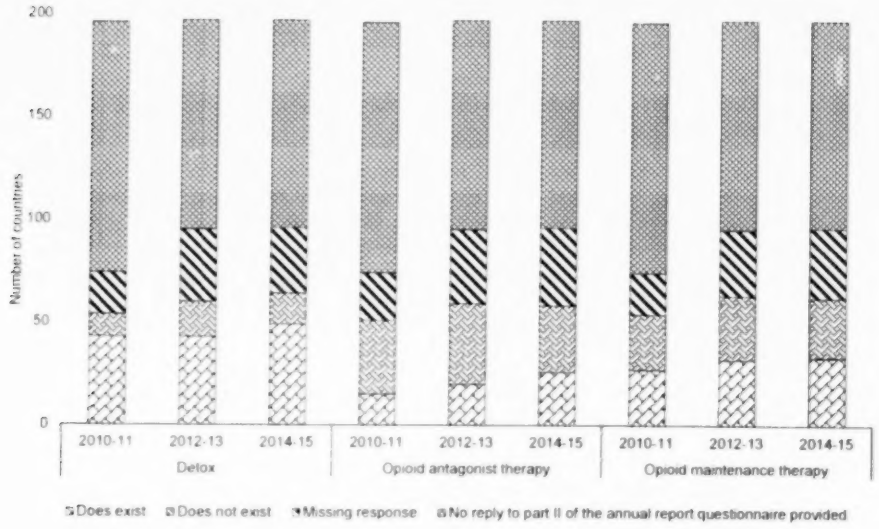


Figure 9

Reports of the existence of social rehabilitation and aftercare treatment services in the community, 2010-11, 2012-13 and 2014-15

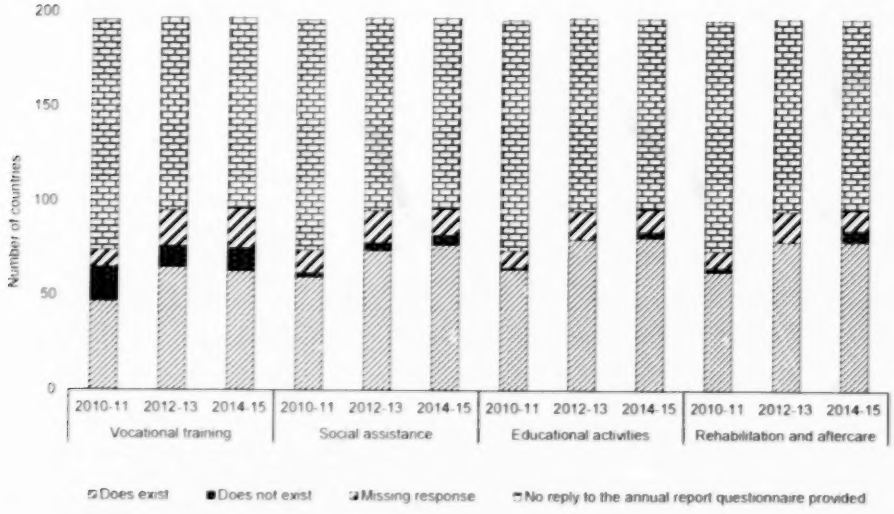


Figure 10

Reports of the existence of social rehabilitation and aftercare treatment services in prison settings, 2010-11, 2012-13 and 2014-15

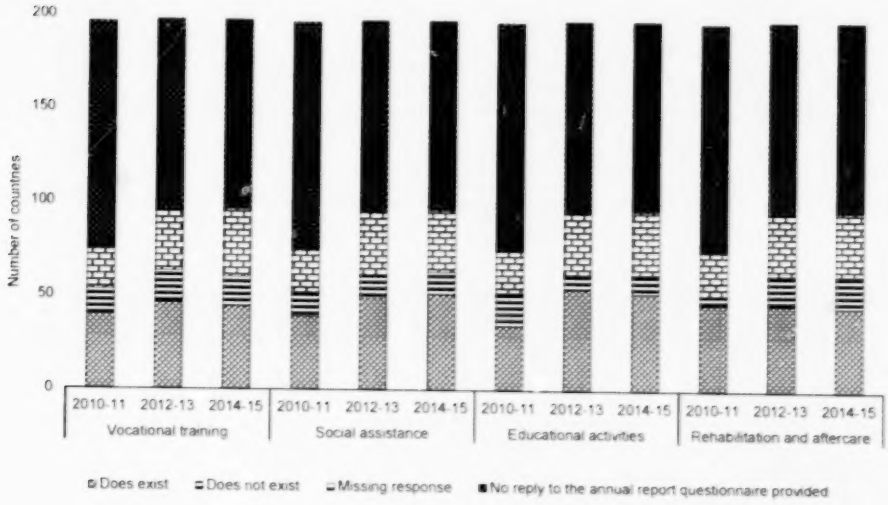


Figure 11

Reports of the existence of psychosocial treatment services in the community, 2010-11, 2012-13 and 2014-15

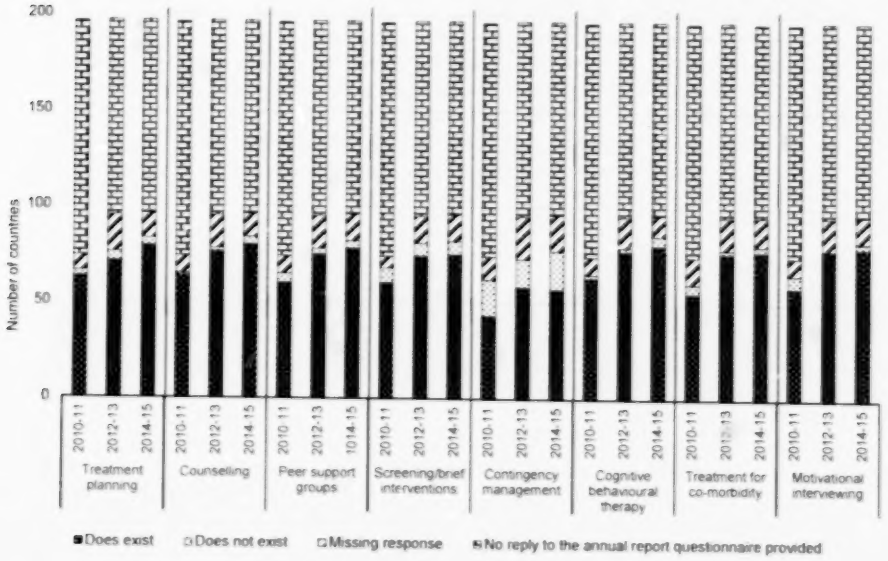
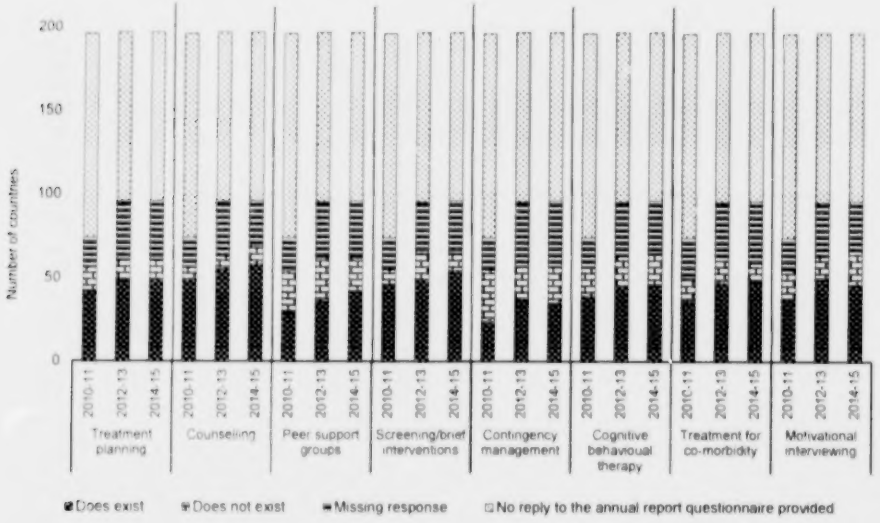


Figure 12
Reports of the existence of psychosocial treatment services in prison settings, 2010-11, 2012-13 and 2014-15



16. The percentage of countries reporting on the coverage of such services that assessed those services as having a high degree of coverage remained below expectations in 2012-13. With regard to coverage of services at the community level, the only variation noted was a decrease in the percentage of countries reporting a high degree of coverage for screening and brief interventions and an increase in the percentage reporting cognitive and behavioural therapy or treatment for co-morbidities. The coverage rate for other services remained stable (see figure 13). As for the coverage rate of services available in prison settings, a general overlap in both reporting cycles was noted across services. The only exceptions were a reduction in the number of countries reporting a high level of coverage for contingency management services and more countries reporting a high level of coverage for cognitive behavioural therapy, treatment for co-morbidities and social assistance services (see figure 14).

Figure 13
Percentage of countries reporting a high degree of coverage of treatment services in the community, 2010-11, 2012-13 and 2014-15

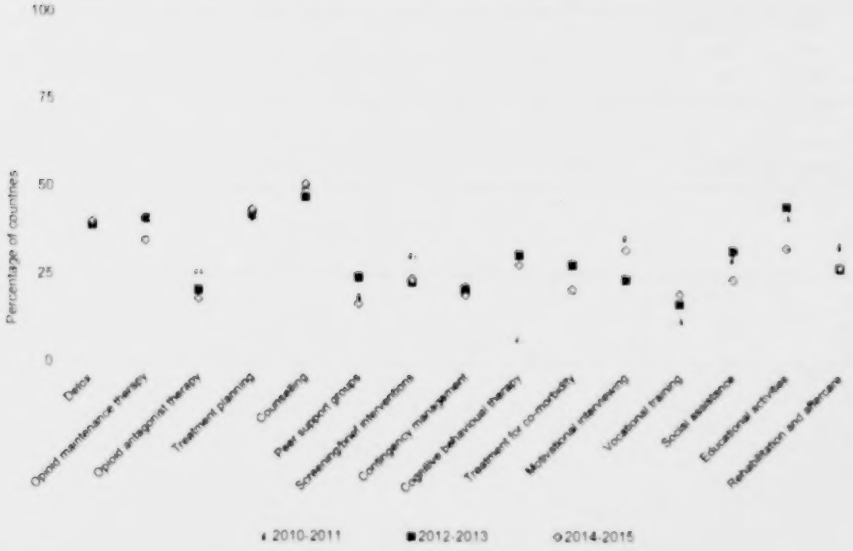
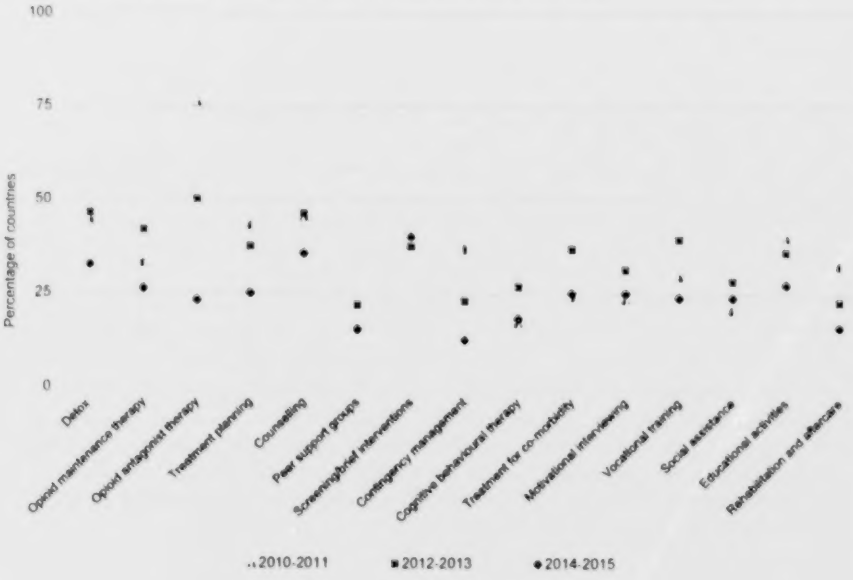


Figure 14
Percentage of countries reporting a high degree of coverage of drug treatment services in prison settings, 2010-11, 2012-13 and 2014-15

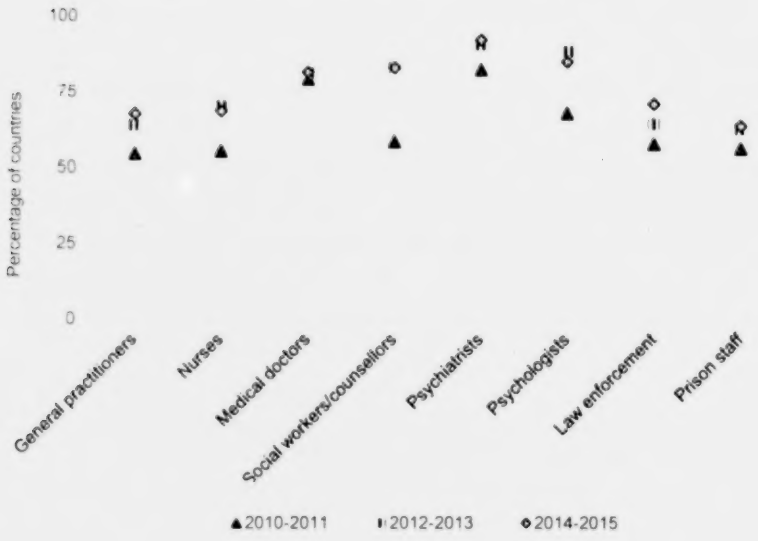


D. Quality standards and training of staff

17. As shown in figure 15, a slight improvement was noted with regard to the existence of training for professionals on drug demand reduction interventions. The most significant increase was in the training of general practitioners, psychologists and social workers. However, law enforcement and prison staff continued to have poor access to training opportunities, despite their frequent interaction with drug users.

Figure 15

Availability of drug demand reduction interventions for professionals as part of their qualification curriculum, 2010-11, 2012-13 and 2014-15



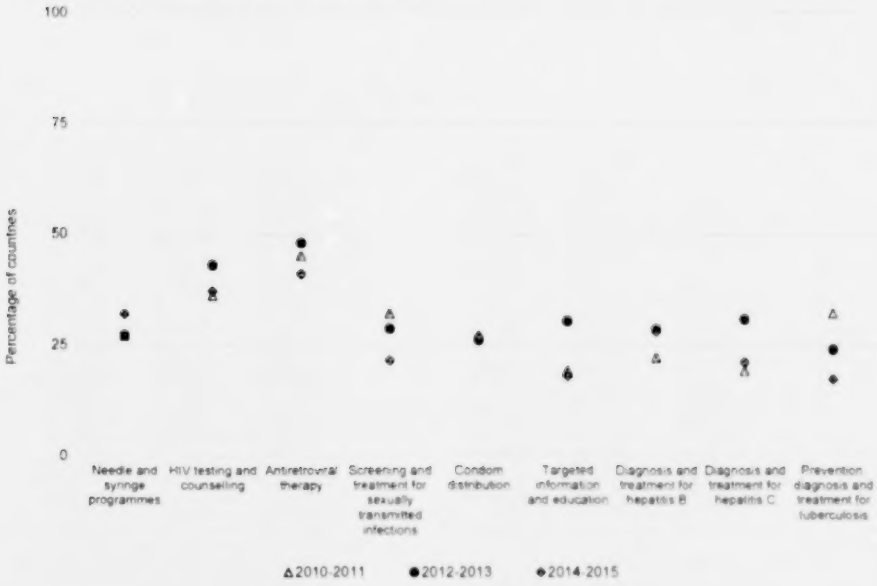
E. Prevention of diseases, including infectious diseases

18. The level of reporting with regard to the existence of services for the prevention of diseases, including infectious diseases, remained very poor in the third reporting cycle. The number of countries reporting on individual services ranged between 33 and 52, with only 30 countries reporting on all services at the community level (31 per cent of the annual report questionnaires available in the third cycle). The percentage of countries not reporting on individual services ranged between 28 and 55 per cent in 2010-11 and 45 and 59 per cent in 2012-13. It is therefore important to note that the conclusions rely only on the responses provided.

19. The percentage of countries reporting that the level of coverage of such services at the community level was high remained stable at below expectation levels. Fewer than 42 per cent of countries reported having at least one service with high coverage. The services with the most frequent reports of a high degree of coverage were antiretroviral services (see figure 16). A relatively similar situation was noted for services in prison settings.

Figure 16

Percentage of countries reporting a high degree of coverage of various services for the prevention, treatment and care of HIV and other infectious diseases in the community, 2010-11, 2012-13 and 2014-15



III. Drug supply reduction and related measures

20. To ensure comparability over time, the analysis of responses is limited to those Member States which completed part II of the survey in all three of the biennium 2010-11, 2012-13 and 2014-15. Member countries that had responded in at least one of the two years within each biennium were included in the analysis. As of the end of October 2015, 81 Member States had done so.[1]

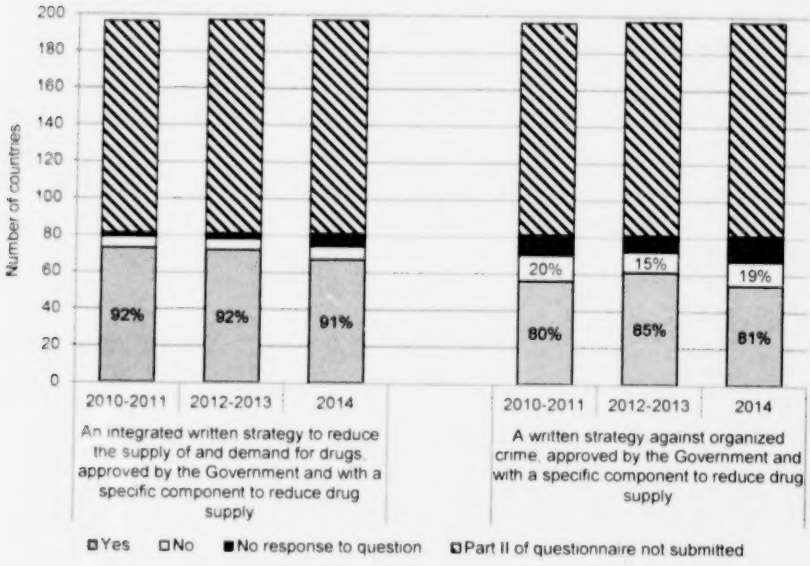
21. For 2010-11 and 2012-13, if a Member State reported that something had occurred during at least one of the two years within the biennium, then it was considered as a positive occurrence during that biennium.

[1] Afghanistan, Algeria, Andorra, Argentina, Armenia, Australia, Austria, Azerbaijan, Belgium, Bolivia (Plurinational State of), Bosnia and Herzegovina, Brazil, Brunei Darussalam, Bulgaria, Canada, Chile, China, Colombia, Costa Rica, Croatia, Cyprus, Czech Republic, Denmark, Ecuador, Egypt, El Salvador, Finland, France, Georgia, Germany, Greece, Guatemala, Indonesia, Ireland, Israel, Italy, Japan, Jordan, Kazakhstan, Kyrgyzstan, Latvia, Lebanon, Liechtenstein, Lithuania, Malaysia, Malta, Mexico, Morocco, Myanmar, New Zealand, Nigeria, Norway, Pakistan, Peru, Philippines, Poland, Portugal, Qatar, Republic of Moldova, Romania, Russian Federation, Saudi Arabia, Singapore, Slovakia, Slovenia, Spain, Sri Lanka, Sudan, Swaziland, Sweden, Syrian Arab Republic, Tajikistan, Tunisia, Turkey, Turkmenistan, Ukraine, United Kingdom of Great Britain and Northern Ireland, United States of America, Uruguay, Uzbekistan and Venezuela (Bolivarian Republic of).

A. Domestic supply reduction activities

22. The number of responding Member States which had approved strategies to combat organized crime has remained stable throughout the period of analysis and the vast majority of those Member States continue to have approved strategies to reduce the supply of drugs (see figure 17).

Figure 17
Number of countries utilizing various measures to reduce drug supply



Note: Percentages are calculated based on the number of countries responding to the question.

23. For each of the three bienniums, over 90 per cent of responding Member States indicated that they had an integrated written strategy to reduce the supply of and demand for drugs, with a specific component to reduce drug supply. Only seven countries reported not having such a strategy in place in 2014-15, mainly in Europe. Of those Member States, two had dropped a strategy of that kind during the period under analysis, since they reported having such a strategy in 2010.

24. Despite the fact that among all responding countries the percentage of Member States with approved written strategies to combat organized crime with a specific component to reduce drug supply remained stable throughout the period, at around 80-85 per cent, differences are observable at the regional level. In particular, there was an increase in Europe, since several European countries reported putting such a strategy in place between 2012 and 2014.[2]

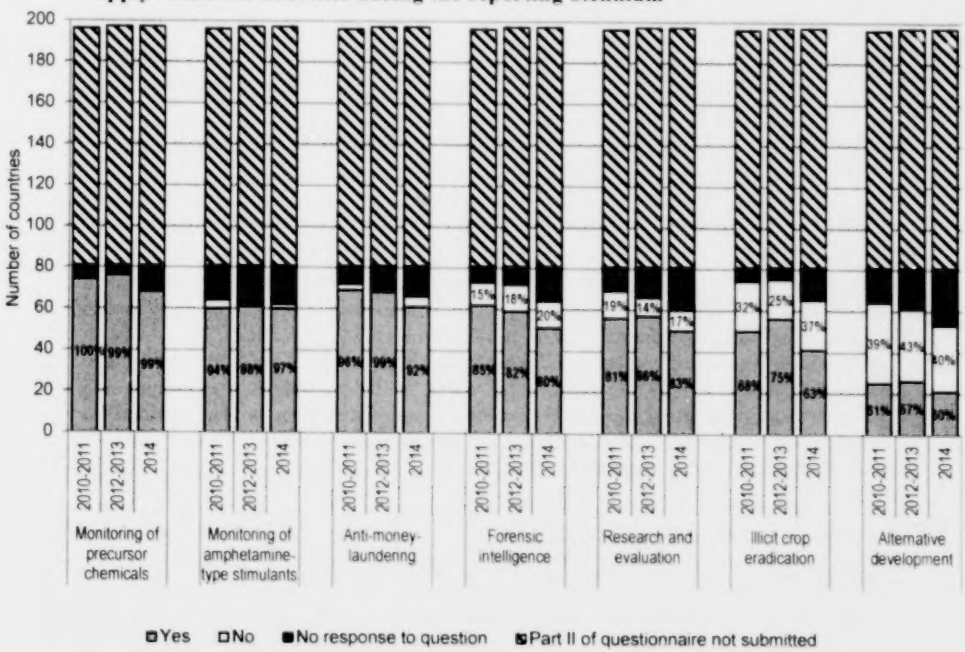
[2] Belgium, the Czech Republic, France, Liechtenstein, Lithuania and Slovakia reported not having adopted such a strategy during the first biennium and subsequently having a strategy in place.

25. Monitoring of precursor chemicals remains at the core of drug supply reduction activities, with almost all Member States that responded to the relevant question being engaged in it for all three bienniums (see figure 18). Similarly, monitoring of amphetamine-type stimulants has been present in between 94 and 98 per cent of responding Member States throughout the period, with the few exceptions being concentrated in Asia and West and Central Europe.

26. The vast majority of Member States that responded (92 per cent) actively engaged in activities to counter money-laundering during 2014-15, slightly down from the level achieved in the previous two bienniums. More than 80 per cent of Member States actively engaged in research and evaluation during 2014-15, with a relatively stable trend over the period. A similar percentage (80 per cent) actively engaged in forensic intelligence activities, a decrease from the level observed during 2010-11. Between 2010-11 and 2014-15, the percentage of responding Member States actively engaged in programmes to eradicate illicit drug crops ranged from 63 to 75 per cent, with a higher proportion in the Americas and Asia, where coca bush and opium poppy cultivation are concentrated. Alternative development programmes were being pursued in 40 per cent of responding Member States in 2014-15, with a higher proportion (close to 60 per cent) among responding countries within the Americas, North Africa and the Middle East and Asia.

Figure 18

Number of countries reporting that they had actively engaged in various drug supply reduction activities during the reporting biennium

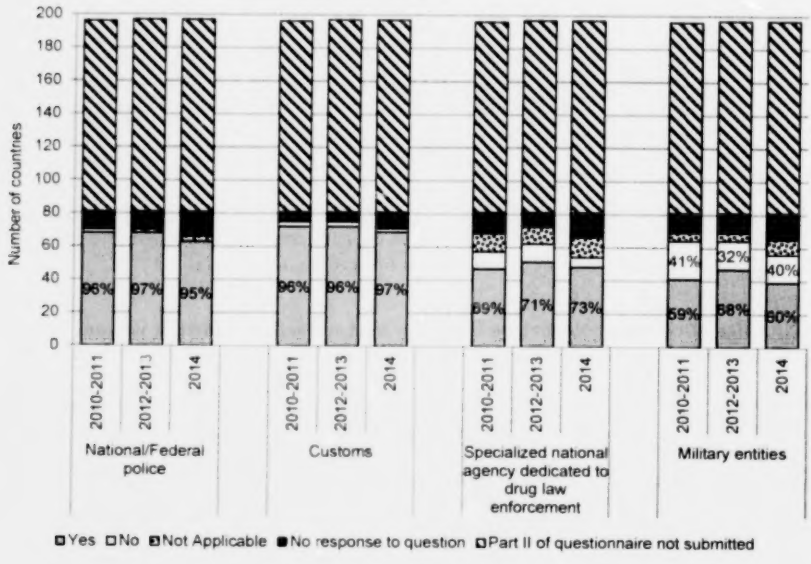


Note: Percentages are calculated based on the number of countries responding to the question.

27. During 2014-15, national or federal police were mandated to reduce the drug supply in all responding Member States. Customs agencies also had a mandate to reduce drug supply in about 97 per cent of responding Member States throughout the period. In 2014-15, only two Member States indicated that customs authorities did not have a mandate to reduce drug supply (see figure 19).

Figure 19

Number of countries reporting that they had mandated various law enforcement agencies to reduce drug supply



Note Percentages are calculated based on the number of countries responding to the question.

28. The percentage of responding Member States which had established specialized national agencies dedicated to drug law enforcement with mandates to reduce drug supply remained stable at the global level, reaching 73 per cent in 2014-15. However, differences are found among regions. In Europe, the percentage is notably lower than in the rest of the world, with less than half of responding Member States reporting having a specialized national agency with a mandate to reduce drug supply. On the other hand, all responding countries in Latin America had this type of agency in place by 2014-15.

29. In 2014-15, 60 per cent of Member States that responded to the relevant question had military entities mandated to reduce drug supply. The institutional set-up varies between regions. While the percentage is notably higher in Africa, the Middle East and the Americas, varying between 70 and 90 per cent throughout the period, it is significantly lower in Europe, where a decrease has been observed during the period, reaching 35 per cent in 2014-15 (down from 48 per cent in 2010-11). The trend has been in the opposite direction in Asia, with a significant increase in the percentage of responding countries with military entities mandated to

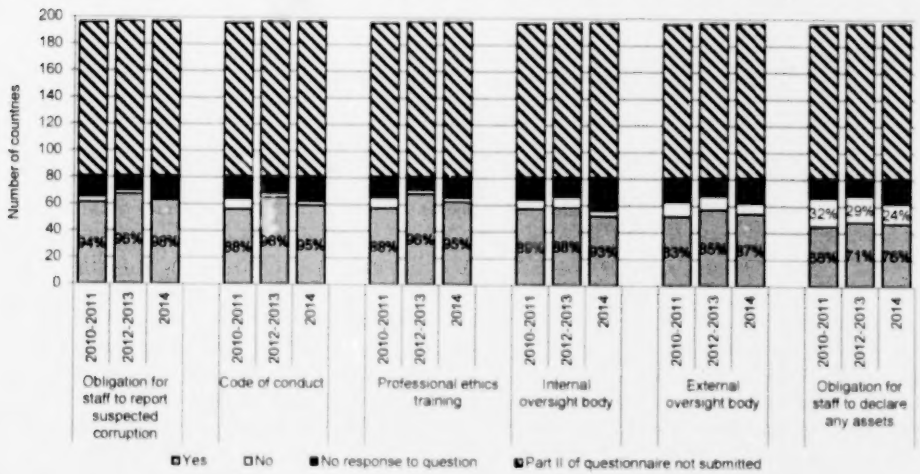
reduce drug supply, reaching 73 per cent in 2014-15, up from 53 per cent in 2010-11.[3]

30. Almost 90 per cent of responding Member States had an entity that was responsible for coordinating the activities of agencies mandated to reduce drug supply throughout the period. However, that percentage is lower in Europe, with a decentralized system in about 20 per cent of responding countries in 2014-15. The types of coordinating agency varies and they can be grouped into four broad categories: specialized national drug agencies/committees, police services, public ministries and organized crime bureaux.

31. In 2014-15, all responding Member States had some set of measures in place to address the threat posed by corruption within domestic law enforcement agencies with a mandate to reduce drug supply (see figure 20). The most common measures (in over 90 per cent of reporting countries) included the obligation for staff to report suspected incidents of corruption, the existence of a code of conduct, professional ethics training and the existence of an internal oversight body. Additionally, the majority of reporting Member States also have external oversight bodies and the obligation for staff to declare any assets in place. All six types of anti-corruption measures have become more common among Member States over time, with the percentage of responding countries that implement each measure increasing between 2010-11 and 2014-15 in all cases, showing the efforts made within the national systems to counter corruption.

Figure 20

Measures adopted/institutions established to address the threat of corruption within domestic law enforcement agencies mandated to reduce drug supply



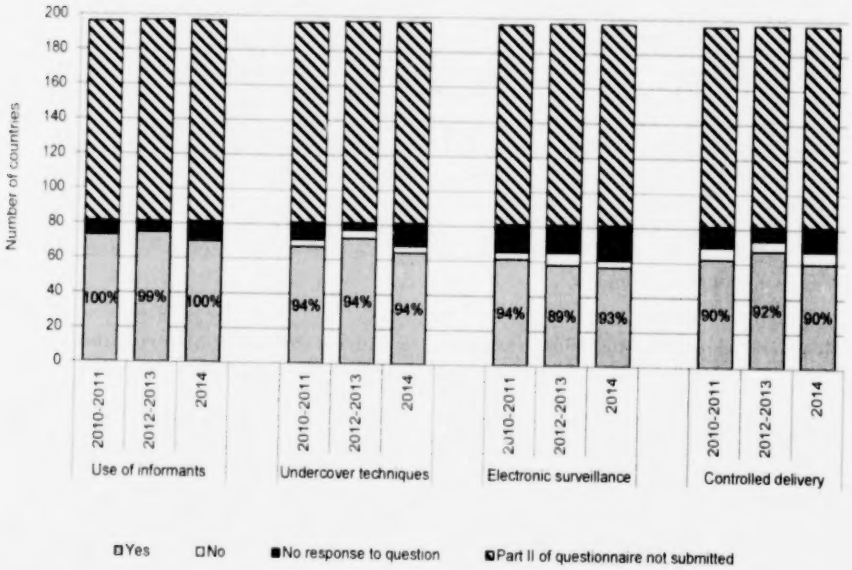
Note: Percentages are calculated based on the number of countries responding to the question.

[3] Pakistan and Singapore reported not having such mandates for military entities in 2010-11, but having them in 2014-15.

32. All responding Member States, across all three bienniums, allowed for the use of special investigative techniques by law enforcement agencies (see figure 21). Over 90 per cent of them reported that law enforcement agencies used informants, undercover techniques, controlled delivery and electronic surveillance during 2010-11, 2012-13 and 2014-15. Some Member States reported employing other methods, such as witness protection, financial or asset tracing, interception of telecommunications and establishing open telephone lines for the general public to report suspicious behaviour.

Figure 21

Investigative techniques used by law enforcement agencies to gather evidence

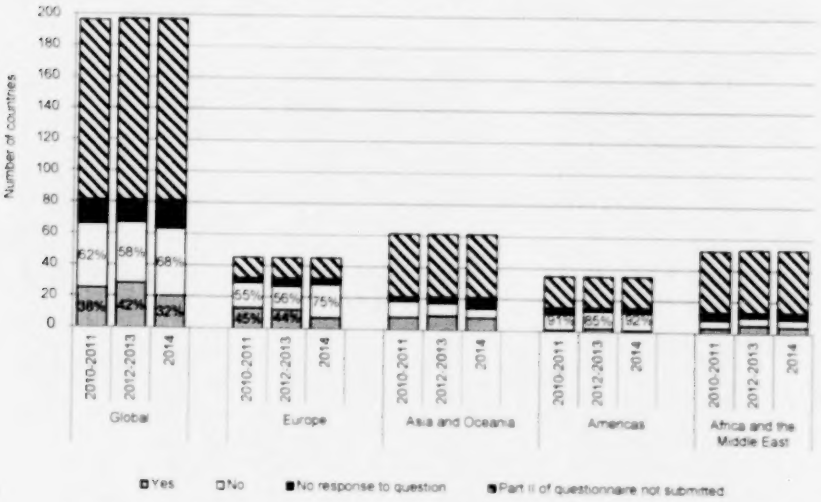


Note: Percentages are calculated based on the number of countries responding to the question.

33. About 32 per cent of Member States responding to the relevant question reported having a system in place to monitor the sale of pharmaceutical preparations containing narcotic drugs or psychotropic substances under international control over the Internet, which represents a decrease from the 42 per cent observed in 2012-13 (see figure 22). That decrease at the global level is mainly driven by European countries, since 21 countries reported not having such a system in place in 2014-15 compared to 15 in 2012-13 and 16 in 2010-11. Additionally, the proportion of responding countries with that type of system in the Americas is notably lower than in the rest of the regions, at 8 per cent in 2014-15.

Figure 22

Whether there is a system in place to monitor the sale of pharmaceutical preparations containing narcotic drugs or psychotropic substances under international control over the Internet, by region



Note Percentages are calculated on the basis of the number of countries responding to the question.

B. Cross-border and international cooperation

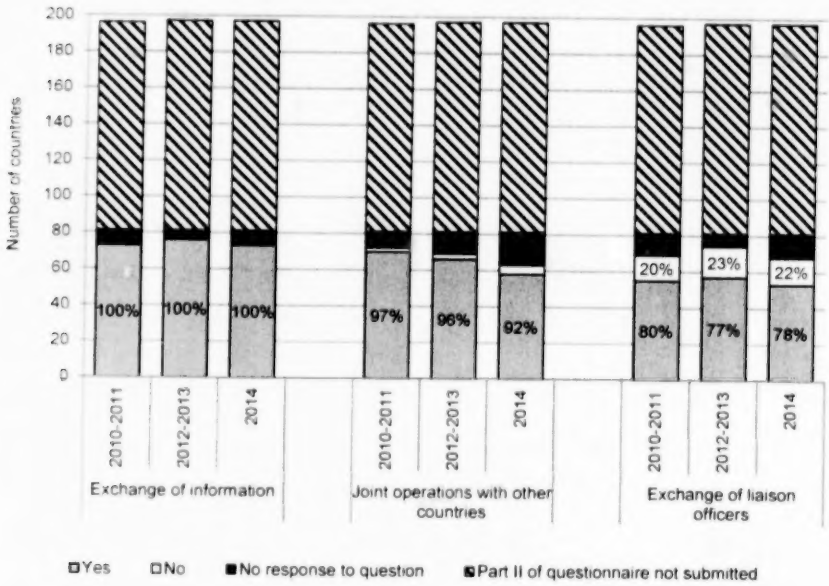
34. Member States continued to engage in a wide range of cross-border activities and international cooperation to reduce the supply of illicit drugs (see figure 23). In 2010-11, 2012-13 and 2014-15, all responding Member States reported that their law enforcement agencies exchanged information with their counterparts in other countries, which highlights the value law enforcement agencies place on the flow of information. The vast majority of responding Member States (92 per cent) engaged in joint operations, with only five reporting not doing so. However, data suggests that this type of activity is not as common as in 2010-11, when all but two responding countries reported carrying out joint operations with other States. Additionally, more than three quarters of responding Member States reported exchanging liaison officers. Countries also reported organized study visits, joint operational meetings, joint controlled deliveries, joint border surveillance and joint training activities.

35. The results of such cooperation included the recovery of large amounts of heroin, cocaine and amphetamine-type stimulants, closer cross-border cooperation between police services, customs services and prosecutors in combating drug trafficking, expert workshops for forensic staff, joint inter-agency training, better executed controlled deliveries and the dismantling of trafficking syndicates. Unsurprisingly, the majority of examples of joint operations involved neighbouring countries. However, examples of interregional cooperation were also provided,

highlighting the fact that law enforcement agencies work on a global scale to combat the illicit trafficking of drugs.

Figure 23

Activities to support cross-border cooperation between law enforcement agencies in different countries



Note Percentages are calculated on the basis of the number of countries responding to the question.

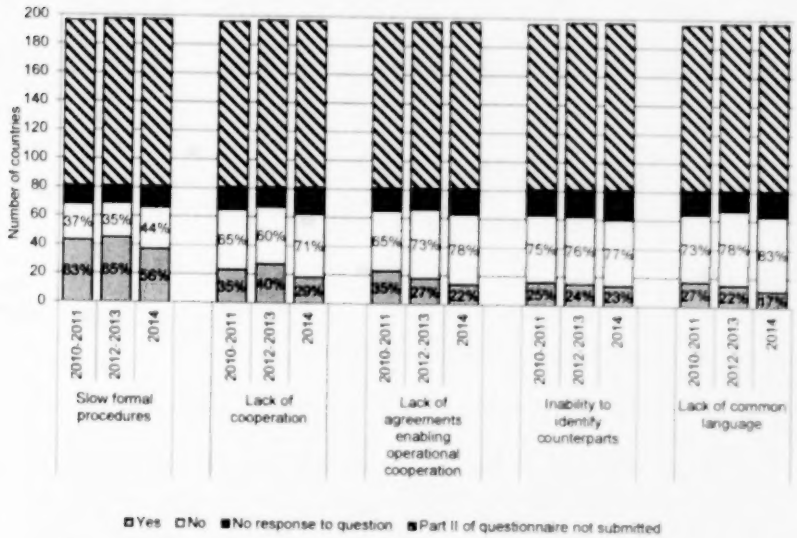
36. The number of Member States reporting that judicial or law enforcement personnel had lost their lives or gone missing in action in the fight against drugs decreased over time, from 23 Member States in 2010-11, to 18 in 2012-13, to 10 in 2014-15.

37. While cross-border cooperation between law enforcement agencies occurred in all responding Member States, many still faced challenges in cooperating with their counterparts in other countries (see figure 24). In 2014-15, more than half of reporting law enforcement agencies (56 per cent) encountered problems with slow formal procedures and a lack of cooperation was reported by 29 per cent of Member States. A lack of agreement enabling operational cooperation and an inability to identify the counterparts to be contacted, were reported by 22 and 23 per cent respectively of responding countries in 2014-15, while 17 per cent found difficulties in the lack of a common language in which to communicate. It is important to note that for each of those five types of difficulties, the proportion of Member States reporting them decreased in 2014-15 with respect to the previous two bienniums, which shows that the efforts made by countries and national agencies have facilitated international cooperation over the period from 2010 to 2014.

38. Countries in the Americas (and in Europe to a lesser extent) were more likely to report finding legal procedures too slow. Similarly, the lack of agreements in operational cooperation was more common among responding countries in North Africa and the Middle East and Asia, while European Member States were less likely to report that this was an issue.

Figure 24

Problems encountered by judicial or law enforcement agencies in cooperating with counterparts in other countries

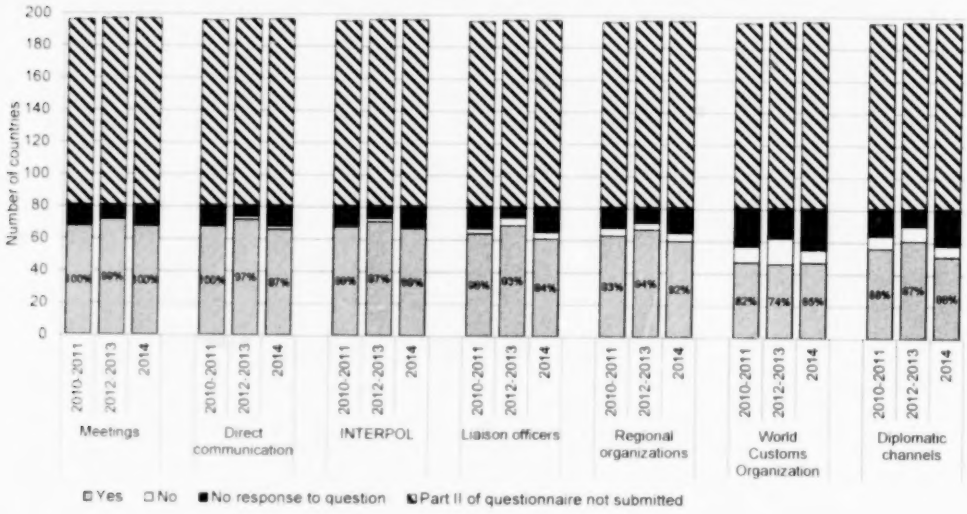


Note Percentages are calculated on the basis of the number of countries responding to the question.

39. A range of communication platforms continue to be used extensively to exchange information between law enforcement agencies (see figure 25). The majority of responding Member States use multiple communication platforms, including both formal and informal channels. The most common ones include regional and international meetings, direct communication between law enforcement agencies, the International Criminal Police Organization (INTERPOL), liaison officers, regional organizations, the World Customs Organization and diplomatic channels. The level of usage of such channels remained relatively stable between 2010 and 2014. Other channels reported included the European Police Office (Europol), the Centre de Coordination de la Lutte Anti-Drogue and the Maritime Analysis and Operation Centre.

Figure 25

Entities or channels used by law enforcement agencies to exchange information with counterparts in other countries



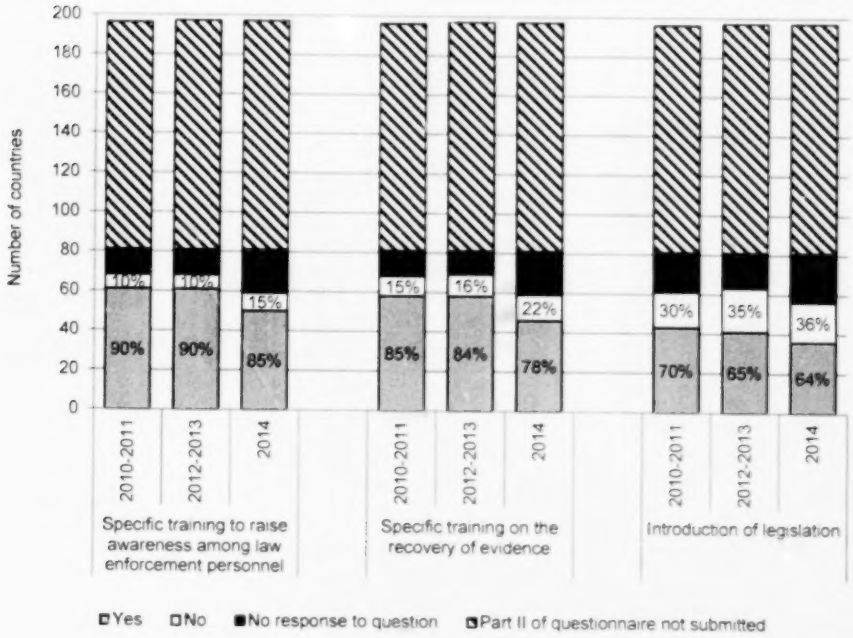
Note: Percentages are calculated on the basis of the number of countries responding to the question.

40. To meet the challenges arising from new technologies (e.g. computers, mobile telephones and the Internet) in combating trafficking in narcotic drugs and psychotropic substances, responding Member States indicated that the steps most frequently taken in 2014-15 included organizing specific training sessions to raise awareness among law enforcement personnel (85 per cent of Member States) and introducing specific training on the recovery of evidence (78 per cent) (see figure 26). Specific legislation was enacted in almost two thirds of responding Member States (64 per cent).[4] Member States in Asia and Oceania appear more likely to have introduced new legislation.

[4] It is important to note that those percentages may be underestimated owing to the sharp decrease in the number of responses from Member States to those questions in the 2014-15 annual report questionnaires. Almost all Member States which did not respond to those particular questions in 2014-15 but had done so in the previous bienniums, responded positively in 2010-11 and 2012-13.

Figure 26

Steps taken to meet challenges arising from new technologies in combating traffic in narcotic drugs and psychotropic substances



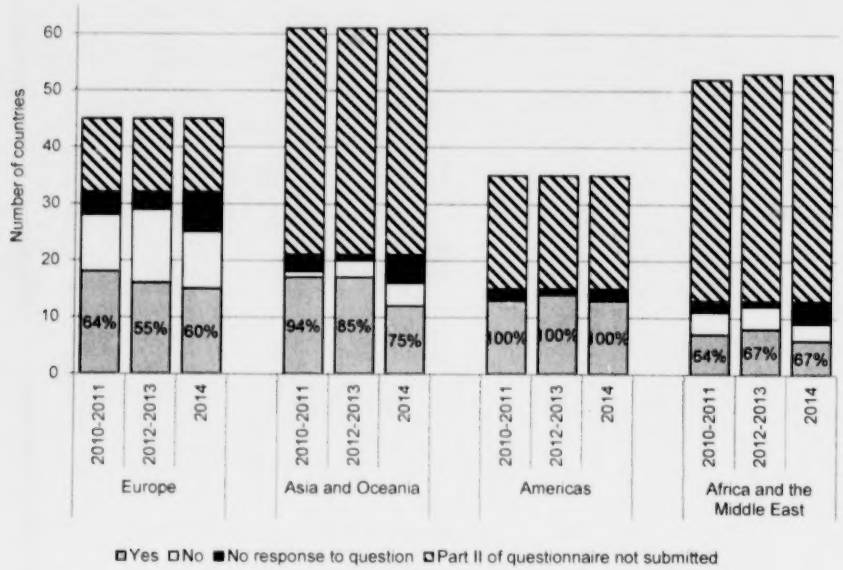
Note: Percentages are calculated on the basis of the number of countries responding to the question.

C. International technical cooperation

41. Nearly three quarters of responding Member States (73 per cent) reported receiving technical assistance in the area of drug supply reduction from another country or from an international organization in 2014-15, down from 79 per cent in 2010-11 (see figure 27). Despite a decrease in Asia and Oceania in 2014-15, technical assistance to countries was more common among reporting Member States from that region and from the Americas, than from other regions. The most common forms of assistance were training and data sharing, followed by the provision of equipment. Less common forms of assistance included the provision of software and financial aid, reaching about 30 per cent of reporting Member States in 2014-15.

Figure 27

Member States that received technical assistance in the area of drug supply reduction, by region



Note Percentages are calculated on the basis of the number of countries responding to the question.

42. Responses indicated that most of the assistance was provided either bilaterally or by the United Nations and other international organizations. In particular, assistance was provided in 2014-15 by United Nations on Drugs and Crime (UNODC), the drug advisory programme of the Colombo Plan for Cooperative Economic and Social Development in Asia and the Pacific, the Organization of American States, Europol, INTERPOL and the World Customs Organization, and Australia, Brazil, Canada, China, Colombia, France, Germany, Italy, Japan, the Netherlands, Panama, Singapore, Spain, Switzerland, Thailand, the United Kingdom and the United States, among others.

43. In 2010-11 and 2012-13, over half of Member States (57 and 53 per cent respectively) receiving technical assistance reported that such assistance was sufficient for their needs. In 2014-15, that percentage decreased to about 43 per cent. When asked about the types of additional assistance required, the most common requests were for training and capacity-building programmes for law enforcement officers. Other requests included financial support and the provision of equipment, and specific technical assistance in fields such as intelligence, forensics and law enforcement.

D. Control of precursor chemicals

44. In 2014-15, 91 per cent of responding Member States reported that they had compiled a list of national companies authorized to manufacture, distribute and trade in precursors. Twenty-four per cent of Member States had adopted new measures in collaboration with relevant industries on the supply of and trafficking in precursors and other chemicals not yet under international control. Measures adopted in 2014 included enhancing control mechanisms and information systems, training of staff from relevant companies, meetings with the objective of enhancing collaboration between Governments and the industry, consultations with relevant non-governmental organizations and code of conduct and cooperation agreements.

45. Approximately half of responding Member States (48 per cent in 2014) had taken steps to address the use of substances not under international control and of substitute chemicals for the manufacture of precursors used in the manufacture of heroin, cocaine or amphetamine-type stimulants. That proportion was higher in Africa and the Middle East and the Americas, and lower in Europe and Asia and Oceania. In 2014-15, those steps included adding new psychoactive and other substances to the list of controlled substances, enhancing other forms of control over their importation, coordinated actions with the chemical industry and participation in international exercises.

46. Most Member States (91 per cent in 2014) indicated that their framework for the control of precursor chemicals included a system of pre-export notification. An increasing number of States utilized the Pre-Export Notification (PEN) Online system designed by the International Narcotics Control Board. In 2014-15, 93 per cent of responding Member States used the PEN Online system (up from 88 per cent in 2010-11) and 88 per cent of responding Member States were of the view that existing international cooperation on the control of precursor chemicals adequately met requirements. It was observed that the PEN Online system was widely subscribed to and that more countries should be encouraged to use it.

47. In 2014-15, 83 per cent of responding Member States indicated that they had systems in place to allow for the post-seizure analysis of precursor chemicals. Responses indicated that almost 90 per cent of those systems made it possible to track the origin of seized precursor chemicals and to carry out controlled deliveries of precursor chemicals.

E. Alternative development

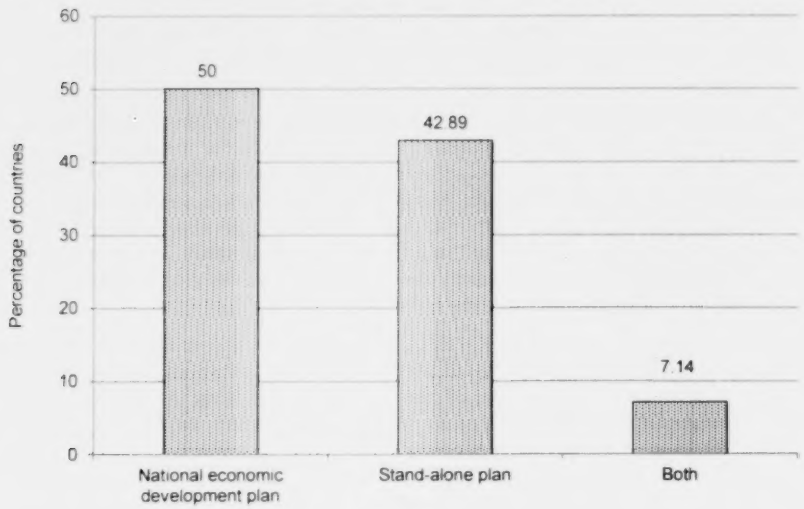
48. Of the overall number of replies to the annual review questionnaire received by the secretariat, only 14 Member States responded to the alternative development section. That level of response is not conducive to a verifiable understanding of the overall efforts made by Member States in adherence to the obligations on the subject of international crop control in the Action Plan on International Cooperation on the Eradication of Illicit Crops and on Alternative Development.

International cooperation on development-oriented drug control

49. Fifty per cent of the countries that responded on the alternative development section of the questionnaire reported having a national alternative development strategy as part of their national economic development plan (see figure 28).

Figure 28

Percentage of countries that have national alternative development strategies to address the illicit cultivation of coca bush, opium poppy or cannabis plant



50. Member States of the Latin American region reported implementing alternative development as either stand-alone plans or part of the national economic development plans.

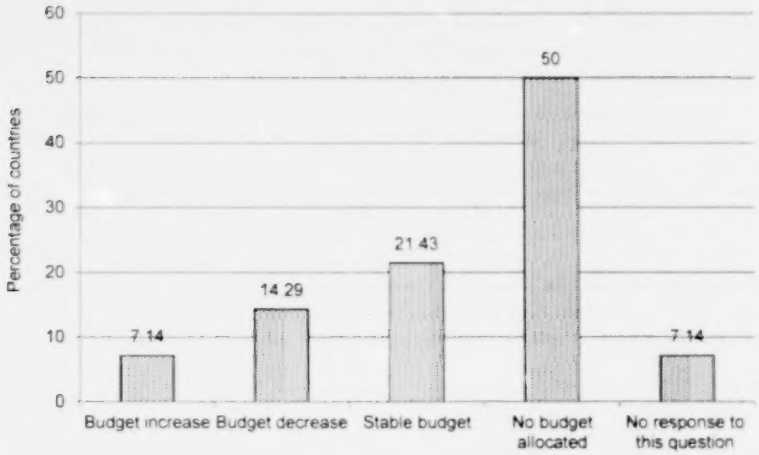
51. Some Member States in Europe reported having a national alternative development strategy as a stand-alone plan, while some reported that while they did not implement alternative development programmes, they supported other countries in their efforts to tackle illicit crop cultivation.

52. In Asia, some Member States have incorporated alternative development projects into their national development goals targeting illicit cultivation, while a few Member States have stand-alone plans.

53. Most Member States reported no change in the allocation of national budgets for alternative development programmes in 2014-15 (see figure 29).

Figure 29

Percentage of respondent countries which reported changes in the budgetary allocation for alternative development programmes in reporting cycle 2014-15, as compared with the previous reporting cycle



Note: Percentages are calculated on the basis of the number of countries responding to the question.

Strengthening research, data collection and assessment tools

54. Most Member States have reported taking appropriate measures to involve the local community and regional governments in the identification, planning, design, execution and monitoring of national alternative development programmes. Most Member States that assist other countries in their efforts to tackle illicit crop cultivation reported that the evaluation missions attempted to receive feedback from the target communities and project beneficiaries directly.

55. A number of Member States reported having difficulty in providing data on the direct impact of alternative development projects on the reduction of illicit crop cultivation. That emphasizes the need for increased data collection and impact assessment measures.

Long-term approach to addressing illicit crop cultivation

56. Most Member States have reported that alternative development programmes support and are primarily targeted at agricultural activities. Some Member States reported that illicit crop cultivation was a major source of income in at least 20 per cent of households in areas of cultivation.

57. The majority of Member States that had alternative development programmes in place reported that the programmes included an evaluation of the impact on gender, with components of the programme specifically targeting women and families.

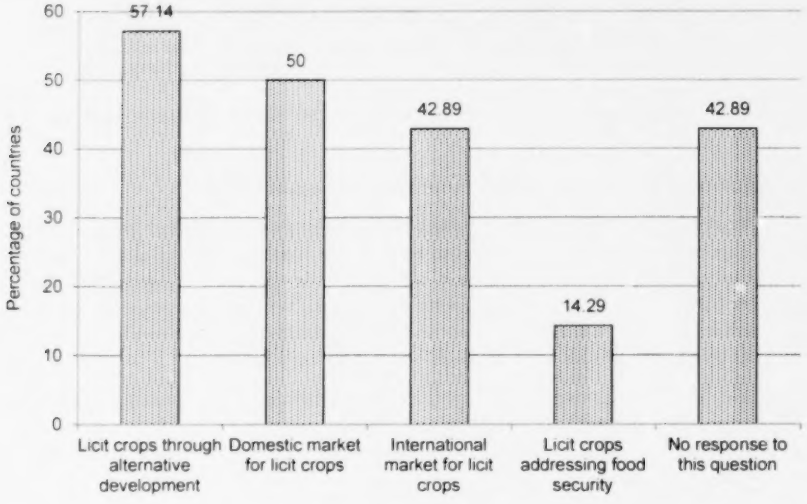
58. The majority of Member States have reported that they have duly considered the effect of projects on the environment by including agroforestry systems and forest management, land stabilization projects and green houses.

59. Several Member States reported that a number of obstacles were still in place that hindered access to domestic and foreign markets for products stemming from alternative development programmes, such as weak infrastructure and pricing, among others. Member States emphasized the crucial role played by the private sector in promoting and finding markets for those products.

60. Several Member States reported that their Governments had promoted licit crop cultivation through alternative development. Some reported selling those products in the domestic market, some in the international market as well, and some used the licit crop cultivation in order to address food security issues, as seen in figure 30.

Figure 30

Percentage of countries in which the Government promote licit crops through alternative development, countries that sell those products in domestic or foreign markets and countries that use products to address food security issues



Note: Percentages are calculated on the basis of the number of countries responding to the question.

61. The majority of Member States with alternative development programmes reported that they had also assessed the impact of those programmes against the Millennium Development Goals, particularly in regard to the eradication of extreme poverty and environmental sustainability.

IV. Countering money-laundering and promoting judicial cooperation to enhance international cooperation

A. Countering money-laundering

1. Legislative framework and criminalization

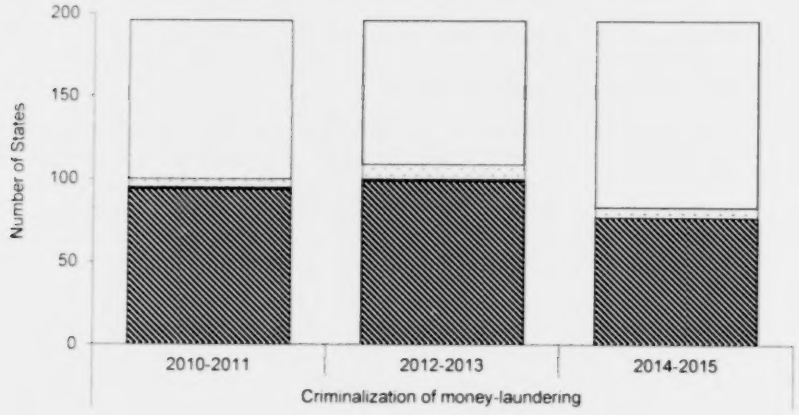
62. Criminals generate trillions of dollars of criminal proceeds yearly and use money-laundering methods to disguise the illicit origins of those proceeds, be it from drug trafficking or other money-laundering predicate crimes.[5] In response, the international community has developed international standards to combat money-laundering and Member States are called upon to criminalize money-laundering by establishing robust and comprehensive money-laundering legal regimes.

63. In two of the three reporting cycles under review, over half of Member States have submitted part I of the annual report questionnaire to UNODC. In the 2010-11 reporting cycle, 100 responses were received, in 2012-13 109 responses were received and only 83 responses in 2014-15. Of those responses, in the 2010-11 reporting cycle, 94 Member States (94 per cent) indicated that money-laundering was a criminal offence in their countries, compared to 99 responses (91 per cent) in 2012-13 and 77 responses (93 per cent) in 2014-15 (see figure 31). The conclusion drawn from the analysis of the data is that, on average, more than 90 per cent of responding Member States have criminalized money-laundering. A significant proportion of that legislation is reported as taking into consideration international requirements, such as the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, the United Nations Convention against Transnational Organized Crime and the United Nations Convention against Corruption and, where they are in accordance with national legislation, the recommendations of the Financial Action Task Force on money-laundering.[6]

[5] See UNODC, "Estimating illicit financial flows resulting from drug trafficking and other transnational organized crimes" (2011), available from www.unodc.org/documents/data-and-analysis/Studies/Illicit_financial_flows_2011_web.pdf.

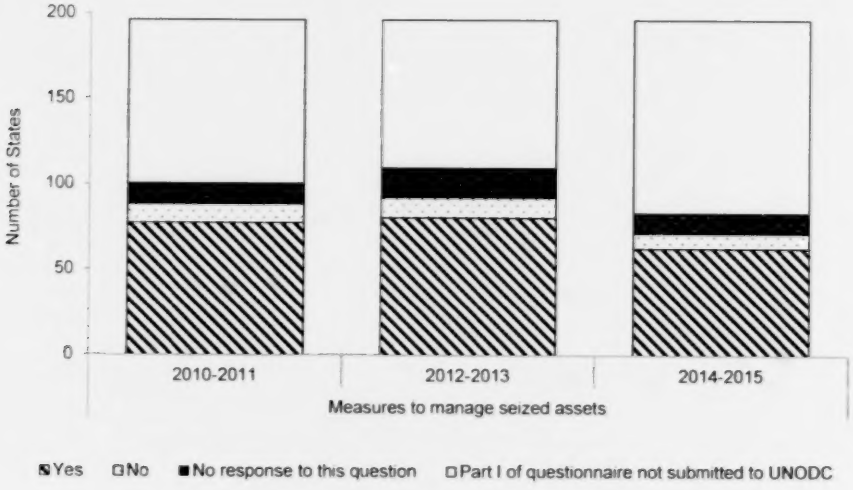
[6] See Financial Action Task Force, "International standards on combating money-laundering and the financing of terrorism and proliferation" (updated October 2015), available from www.fatf-gafi.org/recommendations.html.

Figure 31
Number of States that criminalize money-laundering



64. In the 2010-11 reporting cycle, 77 out of 100 reporting Member States indicated that they had measures in place to manage seized assets, compared to 80 out of 109 responses (73 per cent) in the 2012-13 reporting cycle and 62 out of 83 responses (75 per cent) in the 2014-15 reporting cycle (see figure 32). There was thus a decrease of 4 per cent between the 2010-11 and 2012-13 reporting cycles. The comparison between the 2012-13 and 2014-15 reporting cycles, however, reflects a 2 per cent increase.

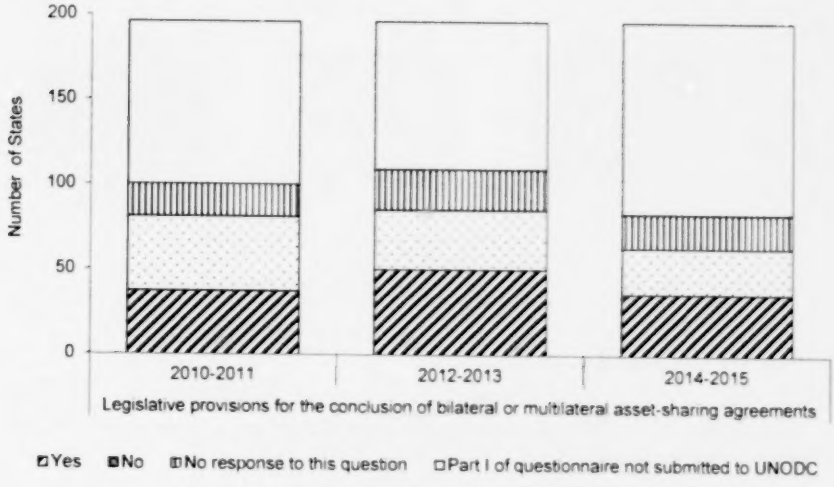
Figure 32
Measures to manage seized assets



65. In the 2010-11 reporting cycle, 44 out of 100 reporting Member States indicated that their legislation did not provide for the conclusion of bilateral or multilateral asset-sharing agreements, while that number was 35 out of 109 (32 per cent) in the 2012-13 reporting cycle and 27 out of 83 (33 per cent) in the 2014-15 reporting cycle (see figure 33). That is encouraging and Member States should redouble their efforts to consider having the necessary provisions in their national legislation in order to conclude bilateral or multilateral asset-sharing procedures, which contribute to international cooperation and have the potential to strengthen the exchange of information between Member States.[7]

Figure 33

Legislative provisions for the conclusion of bilateral or multilateral asset sharing agreements



2. Financial and regulatory regimes for banks and other financial institutions

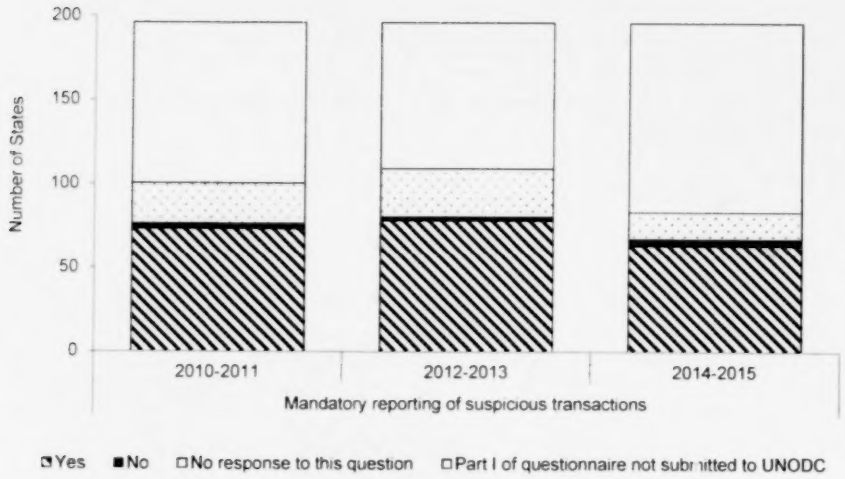
66. A huge problem encountered by financial investigators is the complexity of financial transactions and the fact that legal persons often hide behind a corporate veil, making it extremely difficult to ascertain the identities of the beneficial owners. The analysis has shown a near constant implementation rate between the three reporting cycles in relation to the identification of beneficial ownership for legal persons. In the 2010-11 reporting cycle the figure was 69 out of 100 responses compared to 75 out of 109 responses (69 per cent) in the 2012-13 reporting cycle and 58 out of 83 responses (70 per cent) in the 2014-15 reporting cycle.

67. In the 2010-11 reporting cycle, 73 out of 100 reporting Member States indicated that it was mandatory to report suspicious transactions, compared to 78 out of 109 responses (72 per cent) in the 2012-13 reporting cycle and 63 out of

[7] Such bilateral or multilateral asset-sharing procedures are those related to the laundering of money derived from illicit drug trafficking and other serious crimes, in accordance with the Political Declaration and Plan of Action.

83 responses (75 per cent) in the 2014-15 reporting cycle (see figure 34). The analysis thus reflects a very small decrease in the 2012-13 reporting cycle compared to the 2010-11 reporting cycle, with a very small increase in the 2014-15 reporting cycle.

Figure 34
Mandatory reporting of suspicious transactions

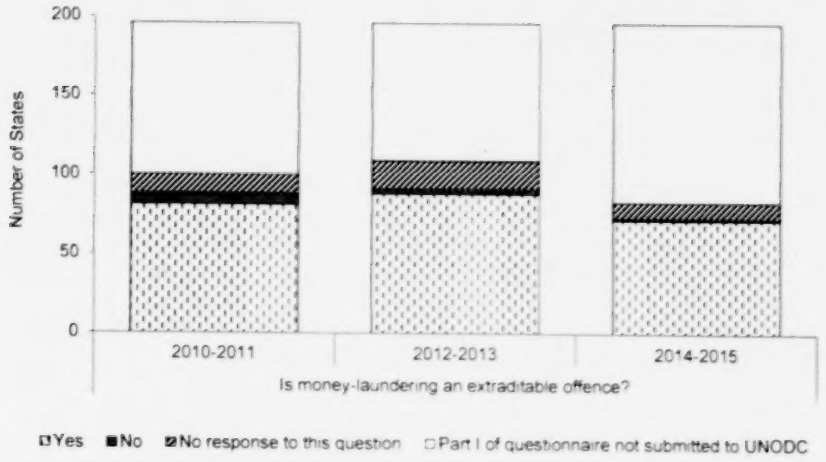


3. Domestic and international cooperation

68. Domestic cooperation, the exchange of information nationally, conducting joint operations and international cooperation all contribute towards an effective anti-money-laundering regime.

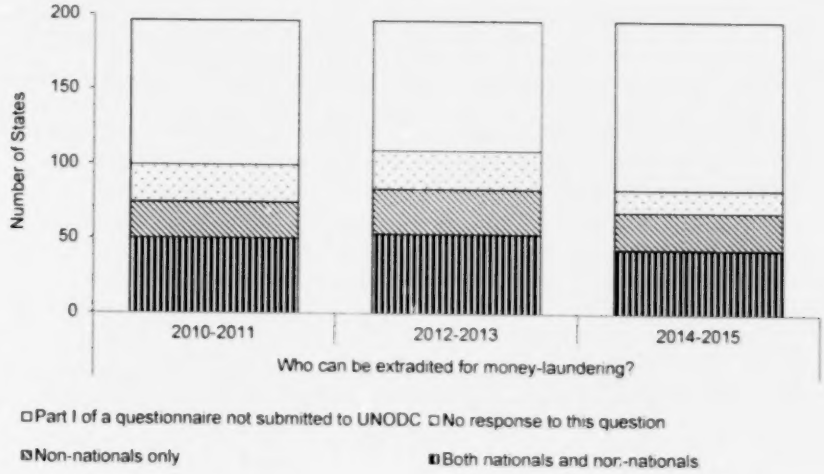
69. In the 2014-15 reporting cycle, 87 per cent of reporting Member States reported that money-laundering was an extraditable offence in their countries compared to 81 per cent in the 2012-13 reporting cycle and 81 per cent in the 2010-11 reporting cycle (see figure 35).

Figure 35
Money-laundering as an extraditable offence



70. In the 2010-11 reporting cycle, 50 out of 100 reporting Member States indicated that both nationals and non-nationals could be extradited for money-laundering, compared to 53 out of 109 responses (49 per cent) in the 2012-13 reporting cycle and 43 out of 83 responses (52 per cent) in the 2014-15 reporting cycle. In the 2010-11 reporting cycle, 24 out of 100 reporting Member States indicated that non-nationals only could be extradited for money-laundering, compared to 30 out of 109 responses (28 per cent) in the 2012-13 reporting cycle and 25 out of 83 responses (30 per cent) in the 2014-15 reporting cycle (see figure 36).

Figure 36
Individuals who can be extradited for money-laundering



B. Judicial cooperation

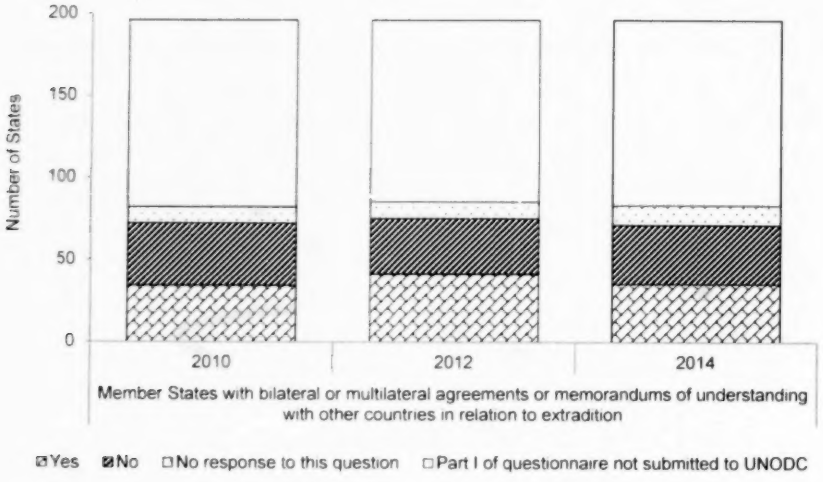
71. A total of 83 replies from Member States to part I of the annual report questionnaire had been received by November 2015, compared with a total of 85 responses received in November 2013.

1. Extradition

72. According to the data provided in response to question 14 of the annual report questionnaire, the number of Member States that have concluded bilateral or multilateral agreements or memorandums of understanding with other countries in relation to extradition ranged from 34 to 41 (see figure 37). Overall, during the past years, an average of 40 per cent of responding States have indicated having in place extradition agreements or arrangements.

Figure 37

Member States with bilateral or multilateral agreements or memorandums of understanding with other countries in relation to extradition



73. According to the data provided, the responding Member States had concluded extradition agreements with a number of other States ranging from 3 to 74 countries in 2010-11, 2 to 95 countries in 2012-13 and 1 to 130 countries in 2014-15.

74. The data provided for 2014-15 confirmed a low level of activity in the conclusion of agreements related to extradition. In 2014-15, out of 83 responses, only 10 indicated the conclusion of that type of agreement during the previous year, with an average number of two agreements per country. Twenty-five countries stated that they had not concluded any agreements in the previous year.

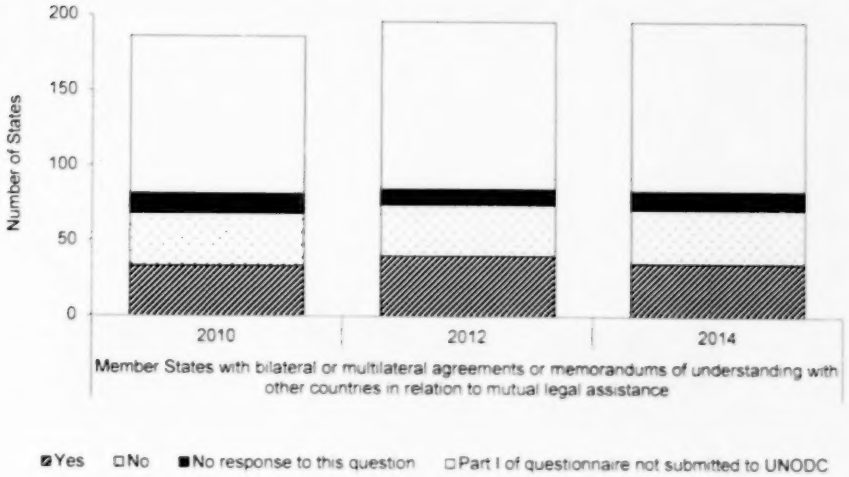
75. Of the 35 States which stated that they had in place agreements on extradition, 28.5 per cent reported the conclusion of at least one agreement in the past year, as opposed to 71.5 per cent not reporting any activity in that regard.

2. Mutual legal assistance

76. In 2014-15, 35 Member States stated that they had in place bilateral or multilateral agreements or memorandums of understanding with other countries in relation to mutual legal assistance (see figure 38). Similarly to extradition, that equates to 42 per cent of responding States.

Figure 38

Member States with bilateral or multilateral agreements or memorandums of understanding in relation to mutual legal assistance



77. Of the aforementioned 35 Member States, 68 per cent reported the existence of agreements with up to 50 countries and 22.8 per cent reported that they had agreements in place with more than 50 and up to 154 countries.

78. Over the past four years, the number of States that have reported having entered into such agreements has remained low and without significant change: five countries in 2010, eight countries in 2011, five countries in 2012 and eight countries in 2014-15. In 2014-15, the eight countries that had concluded such agreements indicated a range of 1 to 4 agreements per year.

79. In order to simplify mutual legal assistance proceedings, some Member States suggested: (a) face-to-face contact between competent national authorities; (b) informal contacts, such as e-mail correspondence; and (c) the use of videoconferencing.

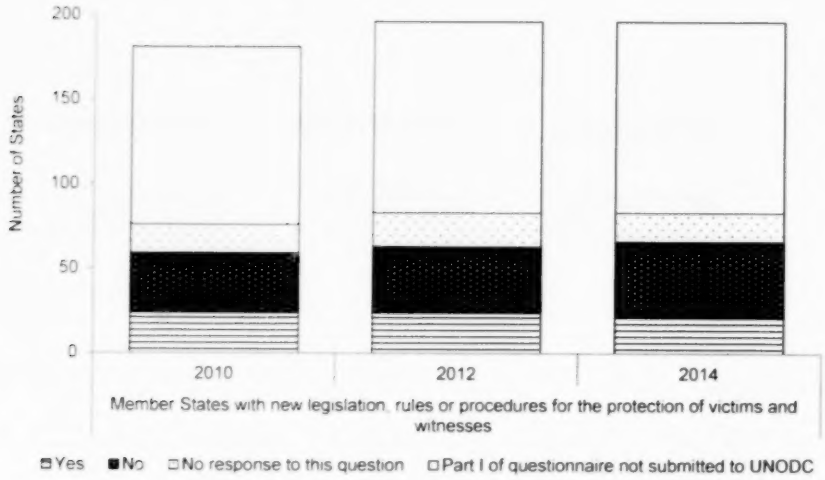
80. Regional and subregional cooperation networks have proven to be instrumental in facilitating the provision of mutual legal assistance. Some States emphasized the role of those networks in enhancing personal contacts and building trust between officials, thus leading to a better understanding of their respective legal and procedural or operational requirements.

3. Witness and victim protection

81. Since the first reporting cycle in 2010, responses have consistently reflected that an approximate average of 25 per cent of responding States have in place new legislation, rules or procedures for the protection of victims and witnesses. In contrast, the percentage of countries that responded negatively to this question has remained stable during the past years: approximately 55 per cent in 2010, 58 per cent in 2012 and 54 per cent in 2014-15, with 17-20 per cent not providing information in that regard (see figure 39).

Figure 39

Member States with new legislation, rules or procedures for the protection of victims and witnesses

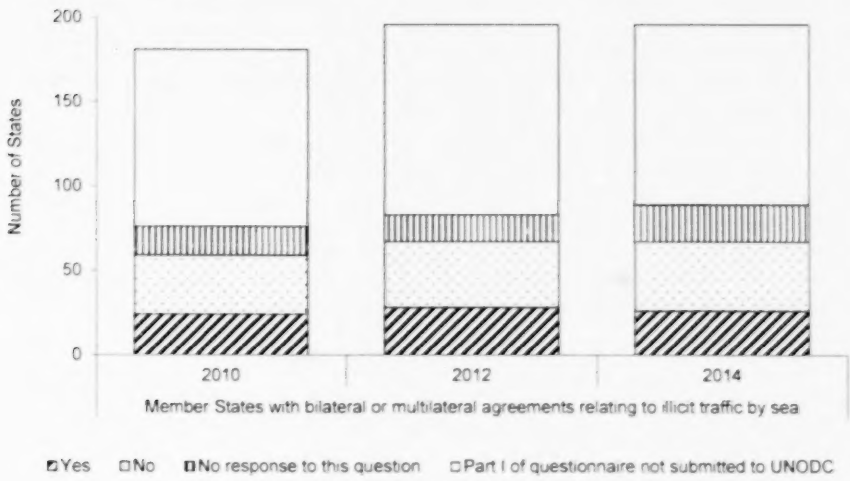


4. Complementary measures

Illicit traffic by sea

82. Since 2010, an average of 25 per cent of responding States have indicated the existence of bilateral or multilateral agreements or memorandums of understanding with other countries relating to illicit traffic by sea (see figure 40).

Figure 40
Member States with bilateral or multilateral agreements relating to illicit traffic by sea



V. Recommendations

83. The availability, coverage and quality of drug prevention, drug dependence treatment and rehabilitation systems, interventions and policies based on scientific evidence, as described in the International Standards on Drug Use Prevention and in the UNODC and the World Health Organization (WHO) discussion paper of March 2008 on the principles of drug dependence treatment,[8] should be expanded, both in community and prison settings, promoting, inter alia, the provision of treatment as an alternative to conviction or punishment.

84. As set out in the International Standards on Drug Use Prevention, an effective prevention system should support children and youth throughout their development, target the population at large (universal prevention), but also support populations and individuals particularly at risk, address both individual and environmental factors of vulnerability and resilience and reach the population through multiple settings (for example, families, schools, communities and the workplace).

85. Drug dependence treatment and care should cater to the diverse health and social needs of those people in need of such services, in order to allow for a continuum of accessible, affordable, diversified and evidence-based care services in a coordinated manner. Significant progress is still needed to address the medical needs of patients, particularly with regard to accessing pharmacologically assisted drug treatment services.

[8] Available from www.unodc.org/documents/drug-treatment/UNODC-WHO-Principles-of-Drug-Dependence-Treatment-March08.pdf.

86. Drug dependence treatment and care services should be based on and respect the human rights of the people using and in need of such services.

87. The planning of drug prevention, treatment and rehabilitation services, including the prevention of health and social consequences, needs to be based on a comprehensive and accurate assessment of drug use and dependence, including vulnerabilities, and of health (especially HIV and hepatitis C) and social status. Those services should be anchored to science and should be based on clear standards.

88. National AIDS and drug policies, strategies and programmes should be aligned with all nine comprehensive interventions of WHO, UNODC, and the Joint United Nations Programme on HIV/AIDS (UNAIDS) for people who inject drugs and facilitate their implementation.[9] The meaningful involvement of community-based organizations and civil society organizations and building their capacity should be intensified. Addressing the HIV epidemic driven by injecting drug use in Eastern Europe and Central Asia, South-East Asia and South Asia is a key priority.

89. People using drugs in prisons should have access to health services, as outlined in the policy brief by UNODC, the International Labour Organization and the United Nations Development Programme entitled "HIV prevention, treatment and care in prisons and other closed settings: a comprehensive package of interventions".

90. Action to ensure access to controlled drugs for medical purposes, while preventing diversion and abuse, should be scaled up.

91. Governments should encourage their law enforcement authorities to work closer with their counterparts in drug source and transit States through capacity-building initiatives and establishing trusted operational cooperation.

92. In response to the growth in trade and passenger volumes by air, land and sea and to ensure that their borders are well protected, Governments are encouraged to review their national strategies related to border management, examine the degree of cooperation between border agencies and assess the application of current controls.

93. Governments must take steps to review their procedures upon receipt of requests for mutual legal assistance from the drug enforcement authorities of other countries in order to ensure a timely response.

94. Governments should ensure that their law enforcement authorities are aware of the importance of forensic science and that they are trained in forensic evidence gathering, evidence preservation, evidence presentation and the chain of custody of exhibits.

95. Governments should facilitate the availability of reference standards of new psychoactive substances for their forensic laboratories, to aid in their detection and identification.

[9] See WHO/UNODC/UNAIDS, "Technical guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users" (Geneva, WHO, 2009).

96. Governments are encouraged to develop specific surveillance lists of non-scheduled substances that are used in the illegal manufacture of new psychoactive substances.

97. Governments are encouraged to take measures to advance the monitoring of the abuse of pharmaceutical preparations, including the early identification of emerging trends.

98. Member States should take into account the United Nations Guiding Principles on Alternative Development when designing and implementing alternative development strategies and programmes. Those strategies and programmes should also be mainstreamed into national development plans.

99. Member States should ensure effective cooperation among all stakeholders involved in the implementation of alternative development programmes, including international and regional institutions, relevant government agencies, civil society and the private sector.

100. Member States should make efforts to improve impact assessment methods that measure the success of alternative development programmes, based on illicit crop reduction estimates and human development indicators.

101. Member States should work towards identifying market access opportunities for the products of alternative development programmes, while enhancing products through innovation and ensuring high quality standards.

102. Member States should strengthen mechanisms for inter-agency coordination and information-sharing, particularly with financial intelligence units, and should enhance legislation and operational cooperation mechanisms to support joint operations and cross-border law enforcement activities to identify, trace and interdict illicit financial flows.

103. Member States should improve the transparency of the beneficial ownership of legal entities in order to allow for more proportionate and effective use of financial investigation techniques by the competent authorities.

104. Member States should continue to broaden international cooperation in criminal matters, including by concluding bilateral and multilateral agreements or arrangements that would give practical effect to the provisions on international cooperation of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances and the United Nations Convention against Transnational Organized Crime.

105. Member States should enhance their capacity to carry out a regular collection of statistical information on the various legal bases for international cooperation.

106. Member States should enhance the efficiency of law enforcement cooperation mechanisms by, inter alia, developing effective systems of information-sharing, establishing channels of communication between their relevant authorities and, if needed, concluding arrangements to foster operational assistance.

107. Member States should consider supporting technical assistance efforts, including those undertaken by UNODC, to strengthen knowledge and capacity within central authorities and other relevant institutions and assist in streamlining legislation related to international cooperation in criminal matters.